Please type & plus sign (+) inside this box  $\rightarrow$  [+]

PTO/SB/21 (\$8.00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE and to a collection of information unless it displays a valid OMB control number.

der the Paperwork Reduction Act of 1995,	norcone a	re required to rest	ond to a collection of information	unless	it displays a valid OMB control number.				
der the Paperwork Reduction Act of 1995,	ic requires to	Application Number		09/502,675					
TRANSMITTAL FORM  (to be used for all correspondence after initial filing)			Filing Date		February 11, 2000				
			First Named Inventor		Shunpei YAMAZAKI et al.				
			Group Art Unit		2829				
			Examiner Name		Evan T. Pert				
	- insign		Attorney Docket Number		740756-2101				
Total Number of Pages in This Sub-	mission	ENCL OSI	JRES (check all that apply)						
			ment Papers		After Allowance Communication to Group				
Fee Transmittal Form			Application)		Other TC 2800 MAIL ROOM				
Fee Attached	☐ Drawir	ng(s)		5 7					
Amendment / Reply		Declar Declar	ation and Power of Attorney		12 S C				
			ing-related Papers		300				
Affidavits/declaration(s)		Petitio			2				
Petitio			on to Convert to a Provisional						
Extension of Time Request Appli			cation of Attorney, Revocation		Ro				
Notice of Appeal Power Chan			ge of Correspondence Address		9				
Information Disclosure Statement			inal Disclaimer						
Certified Copy of Priority	☐ Requ	est for Refund							
Document(s)	☐ CD, 1	Number of CD(s)							
Response to Missing Parts/			The Commissioner is hereby authorized to charge any additional fees						
Incomplete Application			The Commissioner is nereby authorized to charge the required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.						
Response to Missing Parts under 37 CFR 1.52 or 1.5	3		above identified docket number.						
under 57 41		CUDE OF AF	PLICANT, ATTORNEY	, OR	AGENT				
Firm	Jeffrey	<u>L. Costellia</u> Peabody LLF	- 55,465						
or Individual name	8180 G	Greensboro Drive							
	Suite 80	00							
	McLean	n WA 2210	, ,,,,,						
Signature		2. ( <b>k</b>							
	Office	5 1, 2002							
Date	1.								
		CER	TIFICATE OF MAILING		of class mail in an				
I hereby certify that this correspor envelope addressed to: Commissi	ndence is be ioner for Pa	eing deposited v tents, Washingt	with the United States Postal Setton, DC 20231 on this date:	ervice	with sufficient postage as first class mail in an				
Type or printed name					Date				
Signature			Time will y	varv d	lepending upon the needs of the individual case.				

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

Approved for use through	10/31/2002.	<b>OMB</b>	0651-0	032

EEE TRANSMITTAL **FOR FY 2002** 

Complete if Known Application Number 09/502,675 February 11, 2000 Filing Date Shunpei YAMAZAKI et al First Named Inventor Evan T. Pert Examiner Name 2829 Group Art Unit 740756-2101 Attorney Docket No.

Date

October 1, 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT	(\$)520.00	Attome	ey Doc	ket No		740756-2101			ندي	4-
TOTAL AMOUNT OF PATMENT	\-/·								<u> </u>	
						FEE CALCULA	TION (continu	ued)	<del></del>	
METHOD OF PAYMENT			. D. v.	3814 T	ED ES			0		
1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:		3. AD	DITIC Large Entity		Small Entity			ued) P	-	
Deposit Account 19-2380		Fee Code	Fee	Fee	Fee (\$)	Fee Descript			Fee Paid	<del></del>
Number		105 127	130 50	205 227	65 25	Surcharge – late filing Surcharge – late provis	fee or oath sional filing fee o	r cover sheet		
Account Name Nixon Peabody LLP		139	130	139		Non-English transaction For filing a request for		ination		_
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17		112	2,520 920*	112	920	*Requesting publication  *Requesting publication	n of SIR prior to	Examiner action		
Applicant claims small entity status.		113 1 115	,840 <b>*</b> 110	113 215	55	Extension for reply wi	ithin first month			
See 37 CFR 1.27		116	400	216	200	Extension for reply wi	ithin second mon	th		
2. Payment Enclosed:  Check Credit Card Mone	ey 🔲 Other	117	920	217		Extension for reply w			520.00	_
Check	•	118	1,440	218						
FEE CALCULATION		128	1,960	228		Extension for reply w	ithin firth month			
1. BASIC FILING FEE		119	320	219		Notice of Appeal	. 1			-
		120	320	220	160	Filing a brief in suppo	ort of an appear			
Large Entity Small Entity Fee Fee Fee Fee Description Code (\$) Code (\$)	Fee Paid_	121	280	221		Request for oral heari Petition to institute a		eding		
and and Utility filing the		138	1,510	138				came		
101 Pasion filing fo	1 1	140	110	240		5 Petition to revive – u				
100 SSC Plant filing fee		141	1,280	241		) Petition to revive – u				
107 510 201 and D 1 Clima 6		142	1,280	242	640	) Utility issue fee (or n	eissue)			
108 740 208 370 Reissue filing fo		143	460	243	230	Design issue fee				
114 160 214 80 Provisional filir	ng tee	144	620	244		O Plant issue fee				
SUBTOTAL (1) (\$	5) 0	122	130	122		0 Petitions to the Com				_
2. EXTRA CLAIM FEES		123	50	123	5	0 Processing fee under	37 CR 1.17(q)	a Stant		
Fo	ee from	126	180	126		0 Submission of Infor				
Total Claims		581	40	581		Recording each pate number of properties	s)			
Independent3** = X	= 0	146	740			0 Filing a submission § 1.129(a)) 0 For each additional				
Claims Multiple Dependent	= 0	149	740			§ 1.29(b))  Request for Continu				
Large Entity Small Entity Fee Fee Fee Fee Description	on	179	740 900			00 Request for expedite				
Code (\$) Code (\$)	ses of 20	169				application				
105 10 Individual of		Othe	er 166 (8)	pecity).						
	laims in excess of 3 ndent claim, if not paid	* Re	educed b	y Basic	Filing	; Fee Paid	SUBTOTAL (3	(\$)520.00		
and 42 ** Paiggue inc	dependent claims over	1								
original patent 110 18 210 9 ** Reissue claims in excess of 20 and			CERTIFICATE OF MAILING  I hereby certify that this correspondence is being deposited with the United States Postal Service with  Commissioner for Patents. Washington, DC 20231, on							
over original patent  SUBTOTAL (2) (\$) 0			I hereby certify that this correspondence is being deposited with the Gines States States and the States States States and the States States States and the States							
**or number previously paid, if greater, For Reissues, see above			ne:		_					
SUBMITTED BY							Complete (if	(702) 770 0	200	
Jeffrey I Cos	stellia 🔿	Re	egistrat tto ey	on No.	: I	35,483	Telephone	(703) 770-9	300	
Name (Print/Type) Jeffrey L. Cos		-4	tto Key	/Agent,	<u></u>		B.	0 (1) == 1 (	2002	

Signature

Name (Print/Type)